

Site Investigation Report For Permanent Closure or Change-in-Service of U.S.T.

FOR
TANKS
IN
NC

Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location.
[SEE MAP ON REVERSE SIDE OF OWNER'S COPY (BLUE) FOR REGIONAL
OFFICE ADDRESS].

State Use Only

RECEIVED
N.C. Dept. NRCD

I.D. Number

Date Received MAY 22 1991

INSTRUCTIONS

Please complete and return within (30) days following completion of site investigation.

WINSTON-SALEM
Regional Office

I. Ownership of Tank(s)

Kenneth M. Smith

Owner Name (Corporation, Individual, Public Agency, or Other Entity)

1702 Forest Valley Road

Street Address
Guilford

County
Greensboro, NC 27410

City State Zip Code
(919) 288-1753

Area Code Telephone Number

II. Location of Tank(s)

Perkins Restaurant

Facility Name or Company

Facility ID # (if available)

2127 Chapel Hill Road

Street Address or State Road

Alamance Burlington

County City Zip Code

Area Code Telephone Number

III. Contact Person

Name

Job Title

Telephone Number

Ken Smith

owner

(919) 288-1753

Closure Contractor (Name) Piedmont Environmental Services PO Box 18631 Greensboro, NC 27419
(Address)

Lab (Name) Guilford Laboratories Greensboro, NC
(Address)

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

Tank No.	Size in Gallons	Tank Dimensions	Last Contents	Water In Excavation		Free Product		Notable Odor or Visible Soil Contamination	
				Yes	No	Yes	No	Yes	No
1	6000	16' x 8'	#2 heating oil	x			x		x

See reverse side of blue copy (owner's copy) for additional information required by N.C. - DEM in the written report and sketch.

VII. Check List

Check the activities completed.

- ☒ Contact local fire marshal
- ☒ Notify DEM Regional Office before abandonment
- ☒ Drain & flush piping into tank
- ☒ Remove all product and residuals from tank
- ☒ Excavate down to tank
- ☒ Clean and inspect tank
- ☒ Remove drop tube, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures
- ☒ Cap or plug all lines except the vent and fill lines
- ☒ Purge tank of all product & flammable vapors
- ☐ Cut one or more large holes in the tanks
- ☒ Backfill the area

Date Tank(s) Permanently closed: May 2, 1991
Date of Change-in-Service: _____

- ABANDONMENT IN PLACE**
- ☐ Fill tank until material overflows tank opening;
 - ☐ Plug or cap all openings;
 - ☐ Disconnect and cap or remove vent line
 - ☐ Solid inert material used - please specify: _____

- REMOVAL**
- ☒ Create vent hole
 - ☒ Label tank
 - ☒ Dispose of tank in approved manner
- Final tank destination: Safeway Tank Disposal

VIII. Certification (Read and Sign)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Print name and official title of owner or owner's authorized representative

Signature

Date Signed

Thad Chesson VP Piedmont Environmental

5/21/91